
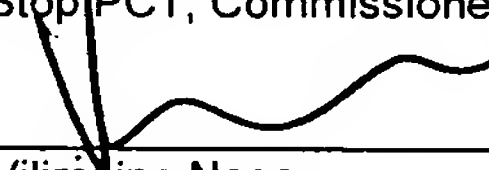


| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | | | ATTORNEY'S DOCKET NO. DE03 0341 US1 U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/574684 | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------|---|---------|--|---------|---------------------|------|--|--------------|-----------|---|--------|------|--------------------|---------|---|---------|------|--------------------------------|--|--|--|--|-------------|--|--|--|
| INTERNATIONAL APPLICATION NO. PCT/IB2004/051867 | | INTERNATIONAL FILING DATE 09/27/2004 | | PRIORITY DATE CLAIMED 10/06/2003 | | | | | | | | | | | | | | | | | | | | | | | |
| TITLE OF INVENTION RESONATOR STRUCTURE AND METHOD OF PRODUCING IT | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APPLICANT(S) FOR DO/EO/US LOEBL HANS PETER MILSOM ROBERT FREDERICK METZMACHER CHRISTOF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant(s) herewith submit to the United States Designated/Elected Office (DO/EO/US) the following: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). <input checked="" type="checkbox"/> has been transmitted by the International Bureau. 3. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). <input checked="" type="checkbox"/> have not been made and will not be made. 4. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)). | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The following document(s) or information are included: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98 6. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included 7. <input checked="" type="checkbox"/> A preliminary amendment 8. <input checked="" type="checkbox"/> Power of Attorney to Prosecute Application before the USPTO 9. <input checked="" type="checkbox"/> Statement under 37 CFR §3.73(b) 10. <input checked="" type="checkbox"/> Authorization Pursuant to 37 CFR § 1.136(a)(3) and to Charge Deposit Account <u>14-1270</u> 11. <input checked="" type="checkbox"/> Receipt Confirmation Postcard | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The following fees have been submitted: | | | | CALCULATIONS | | PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | |
| 12. <input checked="" type="checkbox"/> Basic national fee \$ 300 13. <input checked="" type="checkbox"/> Examination fee (Int'l prelim. exam. report NOT prepared by USPTO)..... \$ 200 14. <input checked="" type="checkbox"/> Search Fee (Int'l Search Report prepared and provided to the Office.) \$ 400 TOTAL OF 13, 14 and 15 = | | | | \$ 900 | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">CLAIMS</th> <th style="width: 20%;"># FILED</th> <th style="width: 20%;"># EXTRA</th> <th style="width: 20%;">RATE</th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td>11 - 20 =</td> <td>0</td> <td>X \$50</td> <td>\$ 0</td> </tr> <tr> <td>Independent claims</td> <td>2 - 3 =</td> <td>0</td> <td>X \$200</td> <td>\$ 0</td> </tr> <tr> <td colspan="5" style="text-align: center;">TOTAL FEES FOR CLAIMS =</td> </tr> </tbody> </table> | | | | CLAIMS | # FILED | # EXTRA | RATE | | Total claims | 11 - 20 = | 0 | X \$50 | \$ 0 | Independent claims | 2 - 3 = | 0 | X \$200 | \$ 0 | TOTAL FEES FOR CLAIMS = | | | | | \$ 0 | | | |
| CLAIMS | # FILED | # EXTRA | RATE | | | | | | | | | | | | | | | | | | | | | | | | |
| Total claims | 11 - 20 = | 0 | X \$50 | \$ 0 | | | | | | | | | | | | | | | | | | | | | | | |
| Independent claims | 2 - 3 = | 0 | X \$200 | \$ 0 | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEES FOR CLAIMS = | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee for recording the enclosed assignment (37 C.F.R. 1.21(h)) accompanied by an appropriate cover sheet (37 C.F.R. 3.28, 3.31). \$40.00 per property + | | | | \$ 40 | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEES ENCLOSED = | | | | \$ 940 | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the above fees, as well as any additional fee which may be required, with the exception of the Base Issue Fee, or credit any overpayment to our Deposit Account No. 14-1270 . | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SEND ALL CORRESPONDENCE TO: PHILIPS ELECTRONICS NORTH AMERICA CORPORATION Intellectual Property & Standards 1109 McKay Drive, M/S41-SJ San Jose, California 95131 | | | | <div style="border: 1px solid black; padding: 5px; display: inline-block;"> USPTO CUSTOMER NO. 24738 </div> <div style="text-align: center; margin-top: 20px;">  Mike J. Ure, Reg. No. 33,089 Tel.: (408) 474-9077 </div> | | | | | | | | | | | | | | | | | | | | | | | |
| CERTIFICATE OF EXPRESS MAILING | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I hereby certify that this paper and/or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 is addressed to "Mail Stop PCT, Commissioner for Patents, PO Box 1450, Arlington, VA 22313," on the date indicated below. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Date) <u>4/3/04</u> | | | | (Signature)  (Name) <u>Vilimaina Naga</u> | | | | | | | | | | | | | | | | | | | | | | | |